Vermont Mental Health Performance Indicator Project

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<u>MEMORANDUM</u>

TO: Vermont Mental Health Performance Indicator Project

Advisory Group and Interested Parties

FROM: John Pandiani

Sheila Pomeroy

DATE: December 8, 2000

RE: Utilization of Atypical Anti-psychotic Medication at CMHCs

Rates of utilization of new "atypical" anti-psychotic medications are among the performance indicators we are preparing for the Sixteen State Performance Indicator project. This measure was selected for multi-state comparison because "Organizations that are focused on providing quality services work to insure that consumers are receiving treatments that are consistent with defined 'best practices'. At least two sets of guidelines have been developed for the treatment of psychosis. Both consider new generation ('atypical') anti-psychotics to be preferable over older agents. New generation agents have demonstrated advantages in efficacy and, with the exception of clozapine, safety over older agents. Use of the agents may be an indicator of the degree to which consumers of the organization are receiving treatments that conform to best practices."

The Vermont PIP project is focusing on the rate at which these medications are being used by Medicaid clients who received services from community mental health programs in Vermont. All information used in this analysis was obtained from the Medicaid paid claims database. First, all paid claims for an atypical anti-psychotic medication (Clozapine, Risperidone, Olanzapine, and Quetiapine) were selected from the Medicaid database and a person level computer record was created for all recipients of these medications. Second, all paid claims for a CMHC service were selected from the Medicaid database and a person level computer record was created for all recipients of these services. These two files were then linked using a computer generated recipient identification code to determine the proportion of CMHC service recipients who received atypical medications during the year. The next step in this

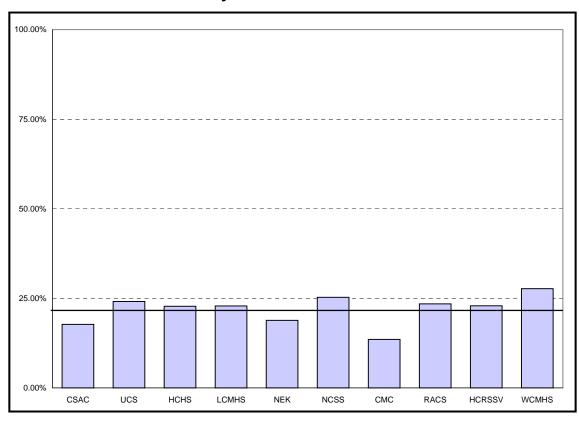
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process will be to focus the analysis on people with a diagnosis of schizophrenia in order to meet the definition used in the Sixteen State Project. Similar analysis on the use of anti-psychotic medication at the Vermont State Hospital will follow.

As you will see, 22% of all Medicaid clients who were served by community mental helath programs during 1999 received an atypical anti-psychotic medication during the year. The proportion of all Medicaid clients who received these medications varied from 13% at the Clara Martin Center to 28% at Washington County Mental Health. (It is interesting to note that these community mental health clients made up less than 25% of all recipients of atypical anti-psychotic medications.)

We look forward to your comments on this measure of program performance and your suggestions for further analysis. Your comments and suggestions will be appreciated at 802-241-2638 or jpandiani@ddmhs.state.vt.us.

Community Mental Health Program Medicaid Clients Receiving Atypical Anti-Psychotic Medications by Clinic: FY1999



Region/Provider		Total Number	Receiving Atypical Medication	
		Served	Yes	Percent
Addison	- CSAC	728	129	17.7%
Bennington	- UCS	750	181	24.1%
Chittenden	- HCHS	1,813	413	22.8%
Lamoille	- LCMHS	411	94	22.9%
Northeast	- NEK	1,290	243	18.8%
Northwest	- NCSS	566	143	25.3%
Orange	- CMC	635	86	13.5%
Rutland	- RACS	1,057	248	23.5%
Southeast	- HCRSSV	1,767	405	22.9%
Washington	- WCMHS	1,238	343	27.7%
Total	Number	10,255	2,285	
	Mean			21.9%

Based on analysis of Medicaid Paid Claims files.

Atypical Anti-Psychotic Medications include Clozapine, Risperidone, Olanzapine, and Quetiapine.

Community Mental Health Programs include childrens and adolescents, adult outpatient, CRT, and emergency services programs.